

Fiscal Year 2012 Annual Report



**“Partnering with the
community to achieve
better results for children
and families.”**

Frederick County Office for Children and Families
Home of the Frederick County Local Management Board

Frederick County Office for Children and Families

Fiscal Year 2012 Annual Report

Frederick County Office for Children and Families
Citizens Services Building
520 North Market Street
Frederick, MD 21701

Phone: 301-600-1063 Fax: 301-600-3400

<http://www.FrederickCountyMD.gov/ocf>

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State of Maryland's Child Well-Being Results: Definitions

BABIES BORN HEALTHY

INFANT MORTALITY: The rate of deaths occurring to infants under 1 year of age per 1,000 live births.

LOW BIRTH WEIGHT: The percent of babies born at low birth weight, weighing less than 2,500 grams (about 5.5 pounds).

BIRTHS TO ADOLESCENTS: The number of births to adolescents less than 20 years of age.

HEALTHY CHILDREN

IMMUNIZATIONS: The percent of children fully immunized by age two.

INJURIES: The number of child injuries that require hospitalization.

DEATHS: The number of child fatalities among children one year of age and older.

SUBSTANCE ABUSE: The percentage of public school students who report using alcohol, tobacco or other drugs.

CHILDREN ENTER SCHOOL READY TO LEARN

KINDERGARTEN ASSESSMENT: The percent of kindergarten students who have reached one of three levels of readiness on the Work Sampling System™ Kindergarten Assessment: full readiness, approaching readiness or developing readiness.

CHILDREN SUCCESSFUL IN SCHOOL

ABSENCE FROM SCHOOL: The percent of students who are absent more than 20 days annually from school.

ACADEMIC PERFORMANCE: The percent of public school students in grades 3 through 8 performing at basic, proficient, or advanced levels in reading and mathematics. Students in grades 3 to 8 take the MSA in reading and math.

DEMONSTRATED BASIC SKILLS: The percent of public school students in grades 9 - 12 performing at the passing level in four core subjects: Algebra, Biology, English and Government.

CHILDREN COMPLETING SCHOOL

DROPOUT RATE: The percent of students in grades 9 through 12 who drop out of school in a single year.

HIGH SCHOOL PROGRAM COMPLETION: The percent of high school graduates who complete minimum course requirements needed for career and technology programs, or requirements needed to enter the University of Maryland, or who complete both.

HIGH SCHOOL DIPLOMA: The percent of persons 25 years of age and over with a high school diploma or equivalent.

GRADUATION/SCHOOL COMPLETION OF CHILDREN WITH EMOTIONAL DISTURBANCES: The percent of children with Emotional Disturbances who graduate from or complete high school.

CHILDREN SAFE IN THEIR FAMILIES AND COMMUNITIES

ABUSE OR NEGLECT: The rate of child abuse or neglect investigations ruled as indicated or unsubstantiated.

DEATHS DUE TO INJURY: The number of injury-related deaths to children.

JUVENILE VIOLENT OFFENSE ARRESTS: The number of arrests of youth ages 10-17 for violent offenses.

JUVENILE SERIOUS NON-VIOLENT OFFENSE ARRESTS: The number of arrests of youth ages 10-17 for serious non-violent offenses.

DOMESTIC VIOLENCE: The number of domestic violence crimes reported.

STABLE AND ECONOMICALLY INDEPENDENT FAMILIES

CHILD POVERTY: The percent of children under 18 whose families have incomes below the poverty level.

SINGLE PARENT HOUSEHOLDS: The percent of all households that are headed by a single parent.

OUT-OF-HOME PLACEMENTS: The rate of children placed in out-of-home care.

PERMANENT PLACEMENTS: The percent of children who leave out-of-home care for a more permanent living arrangement.

HOMELESS ADULTS AND CHILDREN: The rate of homeless adults and children per 100,000 Maryland residents served by programs funded by the Department of Human Resources and other shelter providers.

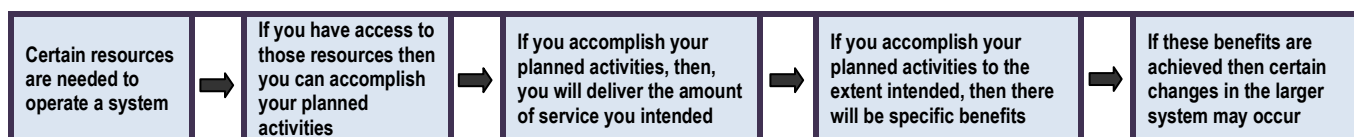
State of Maryland's Child Well-Being Results, 2012

	Year	Frederick	Maryland
Babies Born Healthy			
Births to Adolescents (19 and younger)	2011	122	4866
Infant Mortality (rate per 1,000 live births)	2011	3.6	6.7
Low Birth Weight Babies (Percent of babies born weighing 2,500 grams or less at birth)	2011	7.5%	8.9%
Healthy Children			
Immunizations (2 yrs olds – MD has highest % of all states)	2008	unavailable	90.5%
Child Accident-Related Injuries, (ages 0-19)	2008	237	6438
Child Deaths, (ages 1-19)	2010	<10	343
Alcohol Use, 8th Grade Students Self-Reporting	2007	8.7%	12.7%
Children Enter School Ready to Learn			
Kindergarten Assessment (Maryland Model for School Readiness - MMSR)	2012	88%	83%
Children Successful in School			
Absence from School (More than 20 days)	2011	8.9%	11.3%
Academic Performance – Math (8th Grade MSA; Proficient & Advanced)	2012	80.7%	69.3%
Academic Performance – Reading (8th Grade MSA; Proficient & Advanced)	2012	89%	80.8%
Demonstrated Basic Skills – High School Assessment (Algebra, Biology, English 2, Government) (11 th Grade)	2011	95.0%	88.3%
Children Completing School			
High School Dropout Rate, Grades 9-12	2011	<3%	3.18%
High School Program Completion (University of Maryland Admission Requirements)	2011	72.7%	58.4%
High School Program Completion (Career & Technology Requirements)	2011	10.9%	9.1%
Percent of Persons over the age of 25 with High School Diploma or Equivalent	2010	91.6%	88.0%
Children Safe in Their Families and Communities			
Abuse and Neglect (rate per 1,000)(Indicated)	2008	3.6	4.3
Deaths due to Injuries - Accidents (Ages 10 – 19)	2010	3	71
Deaths due to Injuries - Homicides (Ages 10 – 19)	2010	0	44
Deaths due to Injuries - Suicides (Ages 10 – 19)	2010	1	22
Juvenile Violent Offense Arrests, ages 10-17	2011	55	2898
Juvenile Serious Non-Violent Offense Arrests, ages 10-17	2011	72	3419
Domestic Violence Crimes Reported	2010	619	17,931
Stable & Economically Independent Families			
Child Poverty	2010	7.7%	13.1%
Single Parent Households	2010	21%	36%
Out-of-Home Placements (rate of entry per 1,000 youth under age 18)	2010	8.8	10.8
Permanent Placements (Children adopted within 24 months and reunified within 12 months)	2008	44.64%	36.25%
Homeless Adults and Children – Adults and children receiving shelter services	2009	590	22,131

Frederick County Local Management Board: Logic Model

Logic Model: A logic model is a picture of how a program or system works. It links both short and long-term outcomes with activities and the theoretical assumptions of the system. It demonstrates how a system is expected to work, what activities need to come before others, and how desired outcomes are achieved.

“If . . . Then” Assumptions



Condition

Problem Statement: There are county-wide, community-level, and individual conditions that negatively affect the degree of social, economic, educational, and physical well-being experienced by children and families residing in Frederick County.

Opportunity Statement: There exists an opportunity for enhancing the degree of well-being experienced by children and families residing in Frederick County.

Response

Implement and administer a *County-Wide Results-Based Interagency Child and Family Service Delivery System* that ensures efficient, effective service delivery and optimal well-being for Frederick County children and families.

Local Management Board (LMB): The purpose of the LMB is to serve as the basic infrastructure for administering and overseeing implementation of the County-Wide Results-Based Interagency Child and Family Service Delivery System.

Office for Children & Families (OCF): The purpose of OCF is to support the LMB by conducting the direct activities necessary for implementing and operating the County-Wide Results-Based Interagency Child and Family Service Delivery System.

Community Partnership Agreement (CPA): The CPA is the contractual agreement between the Maryland Children's Cabinet and Frederick County Board of County Commissioners through which the LMB receives its primary source of authority and governmental support for implementing the service delivery system noted above.

LMB Functions: The Maryland Subcabinet defines six primary LMB function areas: (1) *Governance*; (2) *Planning*; (3) *Public Awareness*; (4) *Service Administration*; (5) *Fiscal Management*; and (6) *Oversight*. These function areas are highlighted in the activities column of the Logic Model that follows.

Results-Based System: A results-based system is one that is **effective** and accomplishes what it intends to, demonstrating empirical results.

Interagency System: An interagency system is one that is made **efficient** through the use of strategically linked services.

Frederick County Local Management Board Logic Model

Resources	Activities	Direct Outputs	Short-Term Outcomes	Long-Term Outcomes	Ultimate Impact
Frederick County children & families in need of services	Governance	X number of meetings conducted with X number of board members representing X number of agencies	Collective local vision established & upheld	Infrastructure for results-based interagency service delivery system established	Establishment of County-Wide Results-Based Interagency Child and Family Service Delivery System
Funding for child & family services	Oversight & guidance of planning, public awareness, administrative, fiscal management, & program oversight activities		Operating policies & procedures established & upheld		
Child & family service providing agencies & programs	Collaboration activities & establishment of partnerships between agencies	X number of collaboration activities	Development of integrated service system	Greater availability and easier navigation of services	
Frederick County Local Management Board (LMB) and members		X number of partnerships established with X number of agencies	Comprehensive client need assessments Provision of comprehensive services Provision of prevention-oriented services	Reduction in number of individuals needing deep-end services Reduction in cost of services Reduction in duplication of services	
Frederick County Office for Children and Families (OCF) and staff	Planning	X number of needs assessments conducted & X number of resources & indicators monitored	Identification, prediction, and prioritization of county and community level needs	Integrated multi-agency strategic planning	Increased efficiency of child & family services
Source of authority for operating LMB & OCF (Community Partnership Agreement)	Assessment of community resources & monitoring of needs & well-being indicators			Effective county-wide resource management and allocation	
Funding for operating LMB & OCF	Public Awareness	X number of advocacy services and events conducted for X number of needs	Acquisition of support for priority service needs	Acquisition & maintenance of funds & programs for priority needs	
State Government support for LMB & Results Based Interagency System	Service Administration	X number of contracts for services & X number of technical support activities conducted	Linking programs with needs Development of program technical competencies	Programs address needs Programs operate successfully	
County Government support for LMB & Results Based Interagency System	Fiscal Management	X amount of money managed through X number of grants for X number of programs	Assurance of financial integrity of programs & interagency infrastructure	Sustained operation of programs & interagency infrastructure	Optimal well-being for children & families within Frederick County
Community support for LMB & Results Based Interagency System	Program Oversight	X number of program evaluations monitor X number of outcomes	Program accountability Data-driven programming	Assurance of effective programs & secure funding sources	

PROGRAMS



“Never doubt that a small group of thoughtful, committed citizens can change the world. Indeed, it is the only thing that ever has.”

– Margaret Mead

Children's Mobile Crisis

Way Station, Inc.
FY12 Families Served: 20

The **Children's Mobile Crisis Program** provides urgent mental health response to children, youth and families who are experiencing serious emotional, behavioral and/or psychiatric crises. The program seeks to stabilize child and family crises which could likely lead to hospitalization or an out-of-home placement through the provision of rapid assessment and intervention services provided in natural and community-based settings.



The program offers short-term mental health services to stabilize and support children, youth and families through a crisis period, and links them, as necessary, to longer term community-based services. Mobile Crisis services are intended to reduce the number of children/youth presenting to hospital emergency rooms in psychiatric crisis; divert inpatient/residential admissions and legal involvement whenever possible and appropriate; and to improve access to community-based mental health services.

Positive Outcomes for FY12 include:

- 100% of clients surveyed rated the quality of services received as either excellent or good.
- 100% of clients surveyed indicated that the responder(s) sought to fully understand the nature of the youth/family crisis.
- 100% of clients surveyed would recommend Children's Mobile Crisis to a friend in need of similar help.

Frederick County After School Program

Boys and Girls Club of Frederick County
FY12 Youth Served: 230



Frederick County After School Programs are provided to middle school students to promote positive youth development while minimizing unsupervised time. The program seeks to improve participant well-being by engaging youth in meaningful programs that assist them in becoming healthy young adults. Through collaborative efforts, youth in five prioritized middle schools participated in comprehensive programming designed to improve social, academic and legal outcomes. For the second year, a summer component was implemented, targeting 25 of the most at-risk youth from the five prioritized middle schools, providing 32 hours of programming per week for six weeks during the summer.

Positive Outcomes for FY12 include:

- Daily afterschool programming offered to youth at five high risk middle schools in Frederick County.
- 36 youth served during the summer program.
- 100% of principals surveyed were satisfied with the quality of the after school program.
- 100% of parents indicated satisfaction with the quality of their child's after school program.
- 100% of participating youth did not experience a referral from the Department of Juvenile Services during the program period.
- 98.7% of participating youth did not experience a school expulsion during the program period.
- 81% of youth surveyed during the school year agreed that participating in the program helped them to improve their grades.
- 89% of youth surveyed during the school year agreed that participating in the program helped them to stay away from drugs.
- 93% of youth surveyed during the summer program agreed that participating in the program helped them to treat others with respect.
- 100% of youth served during the summer program did not experience DJS involvement.

Healthy Families Frederick

Mental Health Association
FY12 Children Served: 64
FY12 Families Served: 68



Healthy Families Frederick is a home visiting program targeting first time parents and their children who are assessed to be at-risk for negative child outcomes. Based on the national Healthy Families America model, HFF is a strengths-based service that supports families to become self-sufficient and promotes children entering school healthy, nurtured, and ready to learn.

Positive Outcomes for FY12 include:

- 1054 home visits were completed.
- 100% of participants had an identified medical provider.
- 97% of children did NOT experience involvement with CPS.
- 97% of assessment tools administered on time.
- 98% of children received immunizations as scheduled.
- 252 referrals made to community resources.

Health-E Kids

Dental Care – Frederick County Health Department FY12 Children Served: 1103
Mental Health Care – Mental Health Association FY12 Families Served: 121
Prenatal Care – Frederick Memorial Hospital FY12 Pregnant Women Served: 289

The **Health-E Kids Program** expands access to health care in the following prioritized areas: (1) prenatal care to low-income pregnant women who would otherwise be unable to access care; (2) dental care to low-income children who are unable to access care; (3) mental health care for children and their families who are unable to access care or who require more intensive care. The program was designed by the LMB to target service gaps identified in the 2007 Needs Assessment and to support improved health outcomes for the county's pregnant women, infants, children and families.



Positive Outcomes for FY12 **Health-E Kids Dental Program**, delivered through the Frederick County Health Department, include:

- 330 children and families received oral health presentations.
- 94% of families surveyed were satisfied with the dental services they received.

Positive Outcomes for FY12 **Health-E Kids Mental Health Program**, delivered through the Mental Health Association, include:

- 72 youth and their families linked to mental health services.
- 100% of families surveyed indicated satisfaction with the mental health services they received.
- 89% of families surveyed reported a decrease in stress post services.
- 89% of families surveyed reported an increase in their ability to advocate for the needs of their children post services.

Positive Outcomes for FY12 **Health-E Kids Prenatal Care Program**, delivered through the Frederick Memorial Hospital, include:

- 95% of women receiving at least eight prenatal visits through the FMH Prenatal Clinic delivered babies of healthy birth weight.
 - 96% of pregnant women surveyed indicated satisfaction with the prenatal services they received.
-

Juvenile Entry Diversion Initiative

Lead4Life, Inc.
FY12 Youth Served: 47



The **Juvenile Entry Diversion Initiative (JEDI)** was started in FY 2012 to prevent youth from becoming negatively involved in the juvenile justice system. The Juvenile Entry Diversion Initiative focuses on two core case management components: diverting juvenile offenders from the Department of Juvenile Services (DJS) to community-based programs and services and redirecting Children In Need of Supervision (CINS) cases away from DJS to community-based programs and services. The JEDI program primarily serves first time misdemeanor offenders as well as alleged Children In Need of Supervision.

Positive Outcomes for FY12 include:

- 92% of youth with an identified need for mental health or substance abuse treatment were successfully linked to a provider.
- 100% of families surveyed were satisfied with provided services at case closure.
- 80% of diverted cases satisfied all obligations to successfully complete the diversion program within 16 weeks.

Single Point of Access

Mental Health Association
FY12 Calls Received: 6046

Western Maryland's 2-1-1 System provides a **Single Point of Access** for the system of care that is available 24 hours per day, seven days per week. 2-1-1 is answered by trained call specialists who assess the callers' needs and link them to health and human services using a comprehensive database of federal, state and local services, both government and non-profit. 2-1-1 cuts through the confusion and links callers to the health and human services they need.



Positive Outcomes for FY12 include:

- 4928 targeted referrals were made to community resources.
- 99% of callers surveyed indicated that they understood the information provided by phone counselor.
- 100% of callers surveyed indicated that the phone counselor was respectful of their family.
- 99% of callers surveyed indicated that the phone counselor was knowledgeable.
- 93% of callers surveyed reported increased confidence/competence in addressing future needs.
- 98% of calls were answered within 1 minute response time.



Systems Navigation services provide intensive supports, linkage and coordination for families who require assistance beyond the resource/referrals provided by the Single Point of Access. Systems Navigation services are provided to families whose child is involved with multiple child serving agencies or who has intensive behavioral, educational, developmental, and/or mental health needs. Systems Navigators provide assessment, care coordination, assistance in identifying strengths and needs, and linkages to appropriate services and supports.

Positive Outcomes for FY12 include:

- 92% of families reported an increase in their ability to advocate for the needs of their children after receiving navigation services.
 - 100% of families reported that the Systems Navigator assisted them in identifying family strengths and needs.
 - 100% of families reported that the Systems Navigator was effective in identifying the services appropriate to meet their family's goals.
 - 100% of families reported that the Systems Navigator was effective in helping them set their own goals.
 - 100% of families reported that the Systems Navigator was concerned with the well-being of their family.
-

FY12 OCF PROGRAMS AND ADMINISTRATIVE EXPENDITURES

Program	Source	Amount
After School Program	State of Maryland – Governor's Office for Children	133,547.00
After School Program	Frederick County	94,374.71
After School Program	Earned Reinvestment	2,500.00
Children's Mobile Crisis	Frederick County	21,186.52
Health-E Kids: Dental, Mental Health, and Prenatal	Frederick County	52,180.00
Healthy Families Frederick	Frederick County	28,014.11
Healthy Families Frederick	Federal via State of Maryland - Department of Education	310,740.00
Healthy Families Frederick	Earned Reinvestment	8,000.00
Juvenile Entry Diversion Initiative	State of Maryland – Governor's Office for Children	77,422.16
Single Point of Access	State of Maryland – Governor's Office for Children	98,483.00
Systems Navigation	State of Maryland – Governor's Office for Children	68,136.00
OCF Administration	Frederick County	135,969.07
OCF Administration	State of Maryland – Governor's Office for Children	64,050.00
Total		1,094,602.57



SUBCOMMITTEES



“We don’t accomplish anything in this world alone...and whatever happens is the result of the whole tapestry of one’s life and all the weavings of individual threads from one to another that creates something.”

- Sandra Day O’Connor

Community Engagement Subcommittee

The Community Engagement Committee is comprised of a group of LMB members who coordinate LMB outreach and education activities and ensure diverse community representation within the Local Management Board membership. The Committee monitors board members' tenure, reviews/interviews new nominations and coordinates the LMB's new member orientation system.

Pat Rosensteel, Chair

Executive Subcommittee

The Executive Committee is comprised of the LMB Chair, Vice-Chair and the Chairs of each LMB subcommittee. The Executive Committee meets on an ad-hoc basis to respond to emergency matters, budget issues, grievances and other such managerial matters as may be assigned.

Mary Nagle, Chair
Pat Rosensteel, Co-Chair

Interagency Early Childhood Subcommittee

The Interagency Early Childhood Committee (IECC) is comprised of an interdisciplinary team of early childhood professionals whose mission is "to promote healthy development and well-being of young children and their families through community collaboration". The committee addresses issues affecting families with children up to five years old by providing a professional networking forum for sharing resources, serving as a clearinghouse of information on early childhood services throughout the county, and advocating for the needs of families with young children.

Shannon Aleshire, Chair
Shelly Toms, Co-Chair



Juvenile Delinquency Prevention Policy Board Subcommittee

The Juvenile Delinquency Prevention Policy Board (JDPPB) is comprised of an interdisciplinary team of professionals committed to the prevention and early intervention of delinquent activity. The JDPPB serves as an advisory board to the LMB in identifying risk-factors, effective programming, and outcomes in delinquency prevention. The JDPPB continues to discuss and monitor disproportionate minority representation data and delinquency trend data in Frederick County.

Singy Golden, Chair
Maria Whittemore, Co-Chair

Local Care Team Subcommittee

The Local Care Team (LCT) is a state-mandated board of child and family service agency representatives who review a child's need for community-based services. The LCT is a forum for interagency discussions and problem solving for families of children with intensive needs who require assistance with the identification of potential resources to meet those needs. The LCT is required to review all Voluntary Placement Agreements for children with a developmental disability or mental illness.

Bob Pitcher, Chair
Lisa Beal, Co-Chair



FY12 Office for Children and Families Staff

Christal Hanson
Director

Derek Belz
Evaluation Coordinator

Becky Lafoon (Through March 30, 2012)
Fiscal Manager

FY12 Frederick County Local Management Board Members

Shannon Aleshire
Child Care Choices

Mary Nagle (LMB Chair)
Private Citizen

Barbara Brookmeyer
Frederick County Health Department

Marsha Nelson-Duncan
Fort Detrick/Private Citizen

Chief Kim Dine
Frederick Police Department

Bob Pitcher
Mental Health Management Agency

Singy Golden
Frederick County Department of Juvenile Services

Pat Rosensteel (LMB Co-Chair)
Frederick County Citizen Services

Diane Gordy
Frederick County Department of Social Services

Melanie Thom
Frederick County Finance Department

Kathleen Hartsock
Frederick County Public Schools

Shelly Toms
Family Partnership

Ralph Hertges
Private Citizen

